



www.Calhoun County Community Foundation

910 Tonawanda, P.O. Box 47
Rockwell City, IA 50579
(712) 297-5601
www.cccfiowa.org

Grant Application Overview

We are pleased to announce the availability of the 2012 Calhoun County Community Foundation grant application. This form was developed to make the grant-seeking process simpler and more efficient for nonprofit organizations. Grant applications are available at the Calhoun County Economic Development office, 910 Tonawanda, Rockwell City, IA 50579 or by calling: (712) 297-5601 or send an email to cccdc@windstream.net

What we support: The Calhoun County Community Foundation will provide grants to improve life in Calhoun County, Iowa. We want to help develop all our communities into places where people want to live. The Calhoun County Community Foundation was formed in 2005 to coordinate and provide philanthropic support for community betterment projects in Calhoun County. The Foundation is made up of community-minded individuals who have the ability to assess and initiate activities to enhance Calhoun County. Each year the Foundation makes grant awards to worthwhile projects located in the county that are identified through a community grants application process. Areas of Foundation giving are: arts & culture, community affairs & development, education, environmental protection, health, historic preservation and human services.

The Calhoun County community Foundation is an affiliate of the Iowa Community Affiliate Network, a collaboration of the Greater Des Moines Community Foundation (GDMCF) and the Iowa Area Development Group Community Foundation, who have recognized the need for new avenues to encourage philanthropy throughout Iowa. The Iowa Community Affiliate Network currently serves 31 counties throughout Iowa.

Eligibility to Apply for Funding:

- Tax exempt, non-profit entities classified by the IRS as 501(c)(3) or 170(c)(1)
- One application per organization
- Grant request maximum is \$5,000.
- There are no set of criteria that, if met, will guarantee funding
- Attendance at grant-writing workshop

Please submit the original completed application with attachments, and 12 copies of the actual application – pages 4-7 ONLY – for a total of 13 copies to:

Calhoun County Community Foundation, 910 Tonawanda, P.O. Box 47, Rockwell City, IA 50579

Any questions? Please call/email Pam Anderson (712) 297-5601 or cccdc@windstream.net

Application Deadline:

February 1, 2012 by 4:00 P.M.

Grant Application Instructions

Checklist:

- Grant information cover page has been completely filled out
- Questions of Purpose have been completely filled out
- Project budget has been filled out. Total revenues must equal total expenses
- List separately the Board of Directors and/or Officers of applying entity and fiscal sponsor (if being used)
- Copy of latest CPA Audit or financial statement or IRS form 990 for applying entity. If using a fiscal sponsor, include one of the above statements for fiscal sponsor
- Fiscal Sponsorship Agreement has been completely filled out and signed (if being used, page 8)
- Application has been signed by Board Chairperson of applying entity or authorized person for a governmental unit (on page 4 of application)
- 1 Original with attachments and 12 stapled copies of pages 4-7 **Please note:** We only want one copy of the attachments and any supporting materials but need the original and **12 copies** of the application form pages 4-7 (please include page 8 if fiscal sponsor is being used)
- Copy of 501 (c)(3) or other Not-for-Profit proof attached to grant application (not required for 170(c)(1) unit of government)

Additional Instructions:

- No hand-written applications will be accepted. All applications must be typed.
- Someone from the applying organization must attend the grant-writing workshop in order to be eligible to receive a grant. Fiscal sponsor is not required to attend.
- Grant requests cannot exceed fifty percent of the total project costs
- Ten percent of the local match can in the form of “in-kind” (donated labor and/or materials) All “in-kind” contributions must be documented and approved by the Calhoun County Community Foundation
- Applicants should not contact Calhoun County Community Foundation Board members to lobby for their projects. Questions concerning the application criteria should be directed to Pam Anderson at (712) 297-5601 or email cccdc@windstream.net
- Approved projects must be completed within 12 months of the grant award
- Final Evaluation form, including proof of purchases and expenditure of funds, must be provided to the Foundation within 12 months of the project award date. **Please note: Evaluation must be typed**
- Final Evaluation form must be signed by an individual who has authority
- Acknowledgement: All grant recipients must display visible recognitions to the Calhoun County Community Foundation via a plaque, notation (on signs), or on program brochures

Funding will not be awarded for any of the following purposes:

- Staffing
- Projects with a religious emphasis
- Operational subsidies
- Debt or other types of organizational distress
- Feasibility studies

Definitions/Explanations

Fiscal Sponsor: is an organization that is receiving the money on behalf of the grant applicant and is responsible for disbursing the money for the project and maintaining appropriate documentation. This entity must be a 501(C) (3) or 170(c)(1) unit of government to serve in this capacity.

In-kind gift: when a foundation or other entity contributes a good or service in lieu of providing monetary grants. In-kind contributions support the programs daily operations of an organization.

501 (c)(3)- Corporations, and any community chest, fund, or foundation, organized and operated exclusively for religious, charitable, scientific, testing for public safety, literary, or educational purposes, or to foster national or international amateur sports competition (but only if no part of its activities involve the provision of athletic facilities or equipment), or for the prevention of cruelty to children or animals, no part of the net earnings of which inures to the benefit of any private shareholder or individual, no substantial part of the activities of which is carrying on propaganda, or otherwise attempting, to influence legislation (except as otherwise provided in subsection (h)), and which does not participate in, or intervene in (including the publishing or distributing of statements), any political campaign on behalf of (or in opposition to) any candidate in public office.

170(c)(1) unit of government: includes counties, cities and schools

CPA Audit: document expresses the certified public accountants (CPA's) audit opinion on whether the financial statements present fairly the client's financial position.

Financial Statement: is a report containing financial information about an organization. The required financial statements are balance sheet, income statement, and statement of changes in financial position. They may be combined with a supplementary statement to depict the financial status or performance of the organization.

Nonprofit Exemption: A common misconception is that all nonprofit organizations are exempt from city and state sales tax; the 501(c)(3) designation actually refers to the section of the Internal Revenue Code under which a nonprofit entity has been granted an exemption from federal and state income tax.

The Community Foundation of Greater Des Moines and all affiliate funds are not exempt from paying city and state sales tax; therefore, the Community Foundation and all component funds must pay sales tax on items purchased for your fund's own use and items that will be given away to others.

Program Based: Activity, general programmatic support

Capital Based: The building of or physical improvement of something

IMPORTANT:

If your organization currently has a grant and the project has not been completed, you must submit a letter explaining the progress on the project and expected completion date.

Grant Application Cover Page
RETURN WITH APPLICATION (MUST BE TYPED)

Date: _____

Legal Applicant Requesting Funding/Fiscal Sponsor: _____

Organization conducting project (if different from Legal Applicant/Fiscal Sponsor): _____

Project Title: _____

Federal tax identification number of Legal Applicant/Fiscal Sponsor (EIN): _____

Legal Applicant/Fiscal Sponsor Address: _____ **City/ST/Zip:** _____

Legal Applicant/Fiscal Sponsor Contact Person & Title: _____

Legal Applicant/Fiscal Sponsor Contact Person Phone: _____ **Email:** _____

Organization/Project Address (if different): _____ **City/ST/Zip:** _____

Organization/Project Contact Person & Title (if different): _____

Organization/Project Contact Person Phone (if different) _____ **Email:** _____

Total Cost of Project: _____ **Amount Requested:** _____

Type of Request (circle one): Capital Based or Program Based

Project Focus Area (circle one):

Arts/Culture/Humanities Human Services Education Environment/Animals

Public/Society Benefit Health Other

LEGAL APPLICANT/FISCAL SPONSOR SIGNATURE _____ **DATE** _____

Brief Description of Organization:

Brief Description of Project:

Project Budget
RETURN WITH APPLICATION AND ACTUAL ESTIMATES

Total project budget \$ _____

Total requested from the Community Foundation \$ _____

If you already prepared a project budget that contains this information, please feel free to submit it in its original form.

Budget for the period _____ to _____

<u>Cash Available</u>	<u>Amount</u>
Beginning cash balance	\$ _____
Proceeds from grants	\$ _____
Proceeds from loans	\$ _____
Foundation grants (include requested amount)	\$ _____
Corporate grants	\$ _____
Individual contributions/fundraising	\$ _____
Value of in-kind labor and/or materials (can be up to 10% of local match - documentation required)	\$ _____
Other (please explain)	\$ _____
Total Income	\$ _____
<u>Expenses</u>	
Program expense	\$ _____
Land Acquisition	\$ _____
Construction (materials and labor)	\$ _____
Equipment	\$ _____
Other (specify)	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
Total Expenses	\$ _____

Organization Budget

RETURN ONLY IF YOU ARE NOT SUBMITTING AN ACTUAL ORGANIZATION BUDGET

Income

Source	Amount
<i>Support</i>	
Government Grants	\$
Foundations	\$
Corporations	\$
Individual contributions	\$
Fundraising events and products	\$
Membership income	\$
<i>Revenue</i>	
Government contracts	\$
Earned income	\$
Other (specify):	\$
1.	\$
2.	\$
3.	\$
Total Income	\$

Expenses

Item	Amount
Salaries & Wages	\$
Insurance, benefits, & other related taxes	\$
Consultants & professional fees	\$
Travel	\$
Equipment	\$
Rent and utilities	\$
General operating	\$
Other (specify)	\$
1.	\$
2.	\$
3.	\$
Total Expense	\$

Balance: Income-Expenses=

Fiscal Sponsorship Agreement
RETURN ONLY IF USING A FISCAL SPONSOR

Date:

Fiscal Sponsor (Legal Applicant):

Fiscal Sponsor Contact Person and Email:

Fiscal Sponsor Full Mailing Address:

Sponsored Organization Conducting Project:

Project Name:

_____ (Legal Applicant/Fiscal Sponsor, hereafter referred to as **The Sponsor**) has agreed to serve as a fiscal/program sponsor for the _____ (Organization conducting project, hereafter referred to as the **Sponsored Org.**) as outlined in the attached application and supporting materials. The Board of Directors of **The Sponsor** has passed a resolution adopting the **Sponsored Org.'s** project as a program or project consistent with the **Sponsor's** purpose and mission. The **Sponsored Org.'s** financial activities will be accounted for as a program of **The Sponsor** for IRS auditing and financial reporting purposes.

Since the **Sponsored Org.** is not recognized by the IRS as a charitable tax-exempt entity, **The Sponsor** must exercise full control over the **Sponsored Org.'s** financial administration, management and disbursement of funds resulting from this grant application. **The Sponsor** has delegated _____ (name of person/s) as responsible for fulfilling of these accounting and reporting functions subject to the ultimate authority of the Board of Directors of **The Sponsor**. **The Sponsor** is responsible for ensuring completion of timely reports and submission of necessary financial statements to the Community Foundation's Administrative Office (contact info below). Failure to insure timely reporting on behalf of the **Sponsored Org./Sponsor** will also result in a loss of good standing.

This agreement will be in effect from the date of a grant award to support the above-named project until the grant funds are expended and the final report has been submitted and accepted.

We agree to the terms stated above in this agreement:

Legal Applicant/ Fiscal Sponsor Representative Signature:

Printed Name:

Date:

Sponsored Organization Representative Signature:

Printed Name:

Date:

**Attach to this agreement the Fiscal Sponsor's 501(c)(3) Tax-Exempt Determination Letter or comparable proof of charitable exemption.*